

Docket No. RA5334

PATENT

RECEIVED  
CENTRAL FAX CENTER

APR 14 2004

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

John L. Krack and Joseph D. Condon

Customer Service No.: 27276

Confirmation No.: 2976

Serial No.: 09/620,047

Group Art Unit: 2153

Filing Date: July 20, 2000

Examiner: Choudhary, Anita

For: GATEWAY CGI AND ACCESS CONTROL MANAGE FOR SECURE  
INTER-SERVER COMMUNICATIONS WITH SYSTEM AND METHOD  
FOR WEB SERVING USING SAMECommissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

**RESPONSE TO RESTRICTION REQUIREMENT**

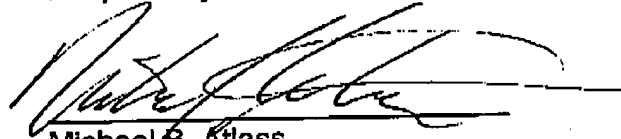
This is responsive to the Patent Office communication of March 24, 2004 related to the above-referenced matter. Applicant elects group I, with traverse. The search required for each of the three groups spans a single class and closely related subclasses. The additional expenses that would be incurred by the applicant to maintain three applications to merely avoid review of two claims from immediate consideration seems inappropriate from an economic standpoint.

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Reconsideration is respectfully requested.

Respectfully submitted,



Michael B. Atlass,  
Attorney for Applicants  
Reg. No. 30,606

Date: April 14, 2004

Unisys Corporation  
Unisys Way  
Blue Bell, PA 19424  
Ph: (215) 986-4111  
Fax: (215) 986-3090

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**CENTRAL FAX CENTER**In Re Application of:  
John L. Krack and Joseph D. CondonCustomer Service No.: 27276  
Confirmation No.: 2976

APR 14 2004

Serial No.: 09/620,047

Group Art Unit: 2783

Filing Date: July 20, 2000

Examiner: Not Assigned

For: GATEWAY CGI AND ACCESS CONTROL MANAGE FOR SECURE INTER-SERVER  
COMMUNICATIONS WITH SYSTEM AND METHOD FOR WEB SERVING USING SAME**OFFICIAL**Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

S I R:

**CERTIFICATE OF TRANSMISSION VIA FACSIMILE  
FILING OF A RESPONSE TO RESTRICTION REQUIREMENT**

I hereby certify that this Response to Restriction Requirement in the above-identified patent application, along with any paper referred to as being attached or enclosed, is being transmitted to telefax number 703-872-9306.

Date: April 14, 2004

Pat Oliver  
(Print Name)  
(Signature)3 Sheets Inclusive. Return Receipt Requested via telefax No.  
215-986-3090